



# AUTHORIZATION TO SIGN WAREHOUSE RECEIPTS

State Form 46956 (R 2/ 10-07)  
INDIANA STATE DEPARTMENT OF AGRICULTURE

## OFFICE USE ONLY

FILE #:

Indiana Grain Buyers and  
Warehouse Licensing Agency  
101 West Ohio Street, Suite 1200  
Indianapolis, Indiana 46204  
Phone: (317) 232-1356  
Fax: (317) 232-1362

**THIS CERTIFIES THAT** the following person (people) is (are) hereby authorized under the provision of the Indiana Grain Buyers and Warehouse Licensing and Bonding Law, I.C. 26-3-7 as amended, to perform the services of signing warehouse receipts at the Indiana-licensed location identified below.

Name and home address of authorized person (people): (Name, address, city, state and zip code.) <i>Please press firmly; you are making 3 copies</i>	Signature of authorized person

Facility name and location: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Owner/manager's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Licensee name and address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please complete and return to Indiana Grain Buyers and Warehouse Licensing Agency at the above address.**